

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2001

Application or District Number

CPL-018

**CLAIMS AS FILED - PART I**

	(Column 1)	(Column 2)
TOTAL CLAIMS	65	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	65 minus 20 =	45
INDEPENDENT CLAIMS	7 minus 3 =	4
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OTHER THAN SMALL ENTITY

RATE	FEE	OR	RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X39=	405	OR	X318=	
X42=	168	OR	X44=	
+140=		OR	+280=	
TOTAL	943	OR	TOTAL	

**CLAIMS AS AMENDED - PART II**

5.31.00

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	65	Minus	65
Independent	7	Minus	7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X39=		OR	X318=	
X42=		OR	X44=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

2.21.00

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	56	Minus	65
Independent	7	Minus	7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X39=		OR	X318=	
X42=		OR	X44=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

7.27.00

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	55	Minus	65
Independent	7	Minus	7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>		

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X39=		OR	X318=	
X42=		OR	X44=	
+140=		OR	+280=	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.  
 \* If the Highest Number Previously Paid For in THIS SPACE is less than 20, enter "20".  
 \* If the Highest Number Previously Paid For in THIS SPACE is 1 to 19, enter "1".  
 \* If the Highest Number Previously Paid For (Total of Independent) is the highest number found in the appropriate box in column 1.

Form 100 (Rev. 10/01) U.S. DEPARTMENT OF COMMERCE

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